BEST AVAILABLE CORV

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

PA991015601

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			63					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			65 minus 20=		* 443			X\$ 9=		OR	X\$18=	774
INDEPENDENT CLAIMS			← minus 3 =		* /			X42=		OR	X84=	84
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=		OR	+280=	1
* If the difference in column 1 is less than zero, ente					r "0" in c	olumn 2	l	TOTAL		OR	TOTAL	1598
CLAIMS AS AMENDED - PART II								SMALL E	=NTITY	OTHER THAN SMALL ENTITY		
		(Column 1) CLAIMS	* * * *		mn 2) HEST	(Column 3)	1 1	SWALL		OR I 1	OWALL	ADDI-
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL
	Total	* 12	Minus		4	=		X\$ 9=		OR	X\$18=	
	Independent	* 4	Minus	***	4	=		X42=	 	OR	X84=	
Ĺ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		1	+140=		OR	+280=	
·								TOTAL			TOTAL	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE		,	ADDIT. FEE	
_		(Column 1)			HEST	(Column 3)	וֹ וֹ		ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER		PREV	MBER IOUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
	Total	*	Minus	**	FOR	=	1	X\$ 9=	<u>ree</u>	OR	X\$18=	PCC.
	Independent	*	Minus	***		=	1	X42=		1	X84=	
ď	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]			OR		
								+140=		OR	+280=	·
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			umn 2)	(Column 3)	_					
AMENDMENT C	,	CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	†
ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						j			 		
	AF.II	41.4	.		.i. 404 :	aluma 2		+140=		OR	+280=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
	The "Highest Nur	mber Previously P	aid For" (Total	or Indeper	ndent) is th	e highest numb	oer fo	ound in the ap	propriate bo	x in co	olumn 1.	